



Submission to the CPSO Consultation on its Complementary and Alternative Medicine Policy

College of Homeopaths of Ontario

Across Ontario, many patients opt for homeopathy instead of or in addition to allopathic care. They do so despite financial and systemic disincentives, demonstrating a strong desire to include homeopathy as part of their personal health-care plan.

Patient choice is a key part of a robust and effective health-care system and has a significant influence on outcomes. Removing systemic barriers and enhancing inter-professional collaboration will go a long way toward reducing pressure on the publicly funded system and improving the quality of the patient experience, including clinical outcomes.

Regulatory policies need to recognize the importance of interprofessional collaboration and to engender a level of respect among regulated caregivers. Patients who choose to incorporate complementary or alternative care into their personal strategies must not risk having their care delayed or denied on the basis of unwarranted obstacles. Open communication among professionals and between patients and those who provide their care is one of the most important pillars of patient safety.

The College of Homeopaths of Ontario (CHO) was established to govern the self-regulation of the homeopathy profession within the framework of the *Regulated Health Professions Act, 1991 (RHPA)* and the *Homeopathy Act, 2007*. The College has a specific duty to protect the public interest.

The CHO commends the CPSO's willingness to consult on its CAM Policy in an effort to improve the delivery, efficiency and quality of health-care services to the public of Ontario. While the right to choose among health-care providers is enshrined in legislation, the reality of that choice is shaped by the determination of what is publicly funded. Physicians have traditionally been the gatekeepers for the delivery of primary health care in Ontario. This makes it particularly important for the CPSO to ensure that its policies reflect the reality of a complex system, and that its members comply with those policies and guidelines in an exemplary way. Like all regulators, the CPSO must pay attention to the principles of transparency, objectivity, impartiality and fairness in all aspects of its work in the public interest.

Increasingly, it has become apparent that the public interest – public safety – is at risk not because of shortcomings in professional competency or patient compliance but rather because Ontario's health-care system is plagued with obstacles to high quality care. These barriers prevent highly trained professionals and highly motivated patients from addressing health concerns efficiently and effectively and, in turn, increase the burden on an already overtaxed system. No one benefits when care has to be duplicated or when patients have to seek alternatives to their long-term providers in order to gain access to even the most basic of tests.

One of the 29 regulated health-care professions in Ontario, homeopathy is a complete system of medicine preferred by hundreds of millions of patients worldwide to address both chronic and acute health-care issues. In Ontario, this is a choice patients make despite the financial disincentive to do so, as homeopathy is outside of the publicly funded provincial health insurance system

and patients must cover their own costs for homeopathic treatment. (Only about 10% of homeopathy patients are covered by third-party insurance benefits.)

The fact that so many people choose homeopathy, despite “free” alternatives available elsewhere, underscores the strength of their desire to be treated by a homeopath. It is important to remember that every time a patient chooses to see a homeopath instead of a general practitioner (or an emergency room team) pressure on those publicly funded alternatives is reduced. Further, if -- as is often the case -- the homeopath is able to resolve the health issue, additional referrals for tests and/or specialty care (and their related wait times) may be averted.

As has been demonstrated here and in many other jurisdictions, homeopaths are extensively trained and competent to play a bigger role in the health-care system. They are able to address a wide range of ailments as primary caregivers or as part of a collaborative multidisciplinary team. This expanded role includes providing support for other health-care professionals in areas such as mental health, mother and child, labour and childbirth, palliative care, addictions, and chronic conditions such as diabetes. Homeopathy is also widely used to mitigate many of the side effects of pharmaceutical interventions.

Thousands of studies demonstrate the efficacy and cost-effectiveness of homeopathy in a wide range of settings. Homeopaths can reduce health-care costs, improve clinical outcomes, and enhance patient satisfaction. However, in order to do so, homeopaths must be fully recognized by policy-makers and other health-care providers as the regulated professionals they are. To achieve the potential benefits for patients and the health-care system as a whole, homeopaths must not be excluded from the care team of any patient who so chooses. Patients who choose to receive their care from homeopaths must not be disadvantaged in terms of their access to other parts of the system. This requires recognition of barriers that currently hinder the quality, timeliness and continuity of care, and a real commitment to seamless and efficient service provision.

Like the College of Homeopaths of Ontario, the College of Physicians and Surgeons has as its primary mandate the protection of public safety. The CPSO's existing policy on complementary and alternative medicine (CAM) includes many recommendations that support the safe and appropriate inclusion of CAM for those patients who choose treatment from regulated professionals other than physicians, or who opt to consult physicians whose knowledge, skills and judgement include alternatives to what might be described as conventional medicine.

The CHO's primary concern is the extent to which the policy is at odds with practice. Despite the CPSO's position, the absence of patient-centred collaboration and communication is proving to be a major patient-safety issue.

Obstacles

A Few Real-life Examples

1) Long-term patient of homeopath successfully managing a number of chronic conditions has to move to a care facility. In-house physician denies access and prevents homeopath from continuing effective treatment. Family is distraught and patient's condition declines, resulting in considerable stress on both the patient and the public health-care system.

2) Patient sees homeopath for routine care. Symptoms suggest thyroid issues. In order to get a simple blood test done, the patient must be referred to and examined by a GP, have tests ordered by the GP, see the GP for a second visit to get results, all in order to return to the homeopath for appropriate continued treatment.

3) Dismissiveness expressed by physician makes patient reluctant to share successes achieved using homeopathy, leading to a lack of communication that eventually results in less-than-optimal care and an undesirable outcome at great cost to both the patient and the system.

Patients who choose homeopathy often find themselves at a significant disadvantage when it comes to obtaining certain types of care. They may lose access to long-time providers if they happen to be placed in a hospital or other care facility. Care is often delayed when access to tests and test results has to be channelled through an otherwise uninvolved physician. And perhaps most concerning, patients are often met with the sort of dismissal or disdain that makes them unwilling to communicate with all members of their provider teams about the whole of their care. The potential for unsafe care due to incomplete information is both dangerous and unnecessary.

Respecting patient choice and the competence and contribution of other regulated professionals is key. For some physicians, this might require being open to further education about why homeopathy works and why hundreds of millions of people around the world rely on it. There are abundant examples of professionals from multiple disciplines working together to benefit patients, particularly in countries where complementary therapies are deeply and harmoniously integrated into the health-care system as a whole. Making it work requires regulated professionals to demonstrate a willingness to collaborate in the best interest of patients, and to eliminate barriers that interrupt continuity of care and/or clear and frank communication.

The CHO applauds the CPSO for recognizing the need to re-examine its policies in light of both an evolving patient profile and the relatively recent addition of several CAM regulatory colleges. As regulators, our organizations share a common mandate and goals that put patient safety in the forefront. Many barriers to achieving the highest level of safe care are easy to identify and could be eradicated with little more than goodwill and clear intent. Others – particularly those based in a lack of understanding – will take longer to address. It can be done, however, if regulators and the professionals under their watch are dedicated to optimizing patient safety and outcomes.

With change underway and a renewed commitment to improving patient care, now is the time to rethink and reshape using all the tools at hand. Homeopaths are already a vital part of health care in Ontario, and their patients represent every walk of life. It is our duty as regulators to focus on what can be achieved when all providers work together in an inclusive system unimpeded by avoidable obstacles.